



Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM
Nursing Home Transmittal No. 239
March 1, 2012

TO: Nursing Home Administrators

FROM: Susan J. Tucker, Executive Director
Office of Health Services

NOTE: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

SUBJECT: PASRR– Update and Clarification of Resident Review Requirements
Applicable to Nursing Facilities

This transmittal outlines and clarifies the circumstances under which a nursing facility is required to refer a resident – regardless of payer source – for a Level II resident review, if the resident has been identified in a Level I screen under the federally-mandated Pre-Admission Screening and Resident Review (PASRR) as having mental illness (MI), or an intellectual disability¹, developmental disability, or a related condition (ID/RC). With the inception of MDS 3.0, the Centers for Medicare and Medicaid Services (CMS) has provided guidance to nursing facilities on when a comprehensive assessment is required as a result of a resident experiencing a significant change in status (known as a “significant change in status assessment” or SCSA.) Training materials issued prior to the October 1, 2010 operational date of the new Minimum Data Set 3.0 (MDS 3.0) have more clearly defined the “significant change in health status” in a resident that requires a full updated MDS assessment and a referral for Resident Review under PASRR, and have clarified the situations when such a review is required.

Significant Change in Health Status

For residents previously identified under PASRR Level II as having MI or ID/RC, a significant change in health status may trigger a referral for Level II Resident Review evaluation. When this happens, the nursing facility is responsible for contacting the Adult Evaluation and Review Services (AERS) unit in the local health department for a possible Level II evaluation. This transmittal provides direction to nursing facilities on those changes that require referral for Level II evaluation.

¹ Even though the federal regulations governing PASRR currently use the term “mental retardation,” this transmittal uses the term “intellectual disability” in accordance with current federal and State law.

Below are some examples of situations in which a resident *who has previously been identified as having MI or ID/RC* may require an updated resident review and should therefore be referred²:

1. The resident demonstrates increased behavioral, psychiatric, or mood-related symptoms;
2. The resident's behavioral, psychiatric, or mood related symptoms have not responded to ongoing treatment;
3. The resident experiences an improved medical condition, such that the resident's plan of care or placement recommendations may require modifications. This may include situations where the improvement is primarily physical, yet Level II evaluation may be desired for the purpose of: 1) identifying an alternative placement that can address the mental health or habilitation needs; or 2) determining those services (including specialized services) that may now be appropriate;
4. The resident's significant change is physical, however his behavioral, psychiatric, mood-related symptoms, or cognitive abilities may influence adjustment to an altered pattern of daily living. For example, an individual whose physical condition has worsened may need additional mental health support services to cope with the changes and their aftermath;
5. The resident indicates a preference (whether verbally or through other means of communication, including behavior) to leave the facility; or
6. The resident's condition or treatment is or will be significantly different than described in the resident's most recent PASRR Level II evaluation and determination. Please note that when such a disparity is discovered, a referral is required whether or not this disparity is associated with a "significant change."

In situations where a resident experiences one or more of the above changes, or a change that is similar in scope, the nursing facility is required to make a referral to AERS no later than fourteen (14) days following the date on which the change became apparent. The AERS representative will assess the situation and make a determination as to whether a Level II resident review is warranted. If it is uncertain whether a change in health status warrants a Level II referral, the facility is *strongly encouraged* to call AERS and discuss the change with staff.

Short Term Admissions

In many cases, an individual with MI or ID/RC requires a nursing facility placement for a relatively short amount of time, for example, for physical therapy or IV therapy. In such cases, the Mental Hygiene (MHA) or Developmental Disabilities (DDA) Administration may make a determination that the individual is appropriate for short term nursing facility placement. If the resident will be remaining beyond the time limit stated in the NF certification, however, *it is the responsibility of the facility* to contact MHA or DDA (as appropriate) and request an extension of the NF stay no later than the expiration date of the current short term determination. If the NF certification does not specify a time period, the facility shall contact MHA or DDA *no later than 120 days* following admission, if the resident is still in the facility. MHA/DDA will, in turn, determine whether to approve an extension of the NF stay or direct the NF to request an updated Level II

² Source: Centers for Medicare and Medicaid Services, Resident Assessment Instrument Version 3.0 Manual (September 2010)

evaluation from AERS. The Program's Utilization Control Agent will verify that a person certified under the Level II PASRR process has been discharged by or before the end of the certification period, or that the facility has contacted MHA or DDA (and AERS if so directed) because it believes a longer stay is warranted.

Residents Not Previously Identified as Having MI or ID/RC

Referrals for Level II resident review evaluations are also required for residents who may not have previously been identified by PASRR to have MI or ID/RC in the following circumstances:

(Note: this is not an exhaustive list)

- A resident who exhibits behavioral, psychiatric, or mood related symptoms suggesting the presence of a mental illness as defined under 42 CFR 483.102 (where dementia is not the primary diagnosis).
- A resident whose intellectual or developmental disability as defined under 42 CFR 483.102, or related condition as defined under 42 CFR 435.1010 was not previously identified and evaluated through PASRR.
- A resident transferred, admitted, or readmitted to a NF following an inpatient psychiatric hospitalization or equally intensive treatment.

To ensure that residents with new (or previously unidentified) conditions that mandate a Level II evaluation under PASRR are identified and evaluated as required, facilities are expected to refer residents who may now be suspected of having MI or ID/RC as a result of changes in these areas to the Adult Evaluation and Review Services (AERS) unit within the local health department. The AERS staff will review these cases and initiate a Level II evaluation if necessary.

Readmission to Nursing Facility Pending Resident Review

In cases where the condition triggering a Resident Review also results in the resident being hospitalized, referral for Level II evaluation should be made before the resident is readmitted to the nursing facility. Please note, however, that the nursing facility may choose to readmit the resident before the Level II evaluation process is completed, with the evaluation being completed in the facility.

Summary

Nursing facilities are required, as a condition of participation in and reimbursement by the Medicaid Program, to report any significant change in a resident's health status – as characterized above – by referring them to the local AERS unit for evaluation or re-evaluation. This requirement applies whether or not a resident has been previously identified as having MI or ID/RC; it is essential that any significant changes that may affect PASRR status as described above be identified and referrals made as appropriate. Also, any short term nursing facility stays for persons with a PASRR certification that are expected to extend beyond the time limit approved by MHA or DDA must be referred to the appropriate administration for an updated Level II evaluation. **Please note that failure to make a timely referral when required may result in denial or recovery of Medicaid payments or a determination that the facility has not complied with the Conditions of Participation outlined in COMAR 10.09.10.03B.**

Any questions regarding this transmittal may be directed to the Nursing Home Program at 410-767-1736. Questions regarding a specific resident's PASRR status should be referred to MHA, DDA, or the local AERS.

cc: Nursing Home Liaison Committee
Local Health Departments
Developmental Disabilities Administration
Mental Hygiene Administration